

Pregnancy Maintenance Initiative (PMI) 2016-2017 (FY17 Auto Copy)

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City-Cowley County Health Department

Period: 07/01/2016 - 06/30/2017

Filter(s): City-Cowley County Health Department;

A - Administration and Management

A.1 - Capacity building and accountability

Start Date:

End Date:

Attachments: LetterofdeterminationKDHE.pdf; CCCHD Org Chart 2-2016 - PMI.pdf

Attach proof of Non-Profit Status (501(c)(3))

Did you attach your Non-Profit Status (501(c)(3))?: Yes

List your PMI Program staff names, positions and email addresses (Note the staff member who is the Primary Point of

Contact): Marsha Donals - PHN - Director of Nursing

Karen Sattler - PHN - Director of PMI Program Case Manager

Cheryl Hughley - PHN Case Manager

Josephine Tijerina - Bi lingual Caseworker

Summarize your staff management plan to include verification of staff licensure, documentation of mandated training, performance appraisal process and professional development plan.: Administrator/Health Officer: manages and directs the City-Cowley County Health Department towards its primary objective and coordinates the activities of the agency in support of policies, goals, and objectives established by the City-Cowley County Joint Board of Health by performing the following duties personally or through subordinate staff: Annual credential/licensure review, staff training, annual employee performance review and professional development plans.

Director of Nursing: is responsible for the professional direction, supervision and coordination of the nursing staff and oversees clinical operation to promote efficient and effective delivery of services.

Account Manager: performs financial administrative duties on behalf of the Department; charge of maintaining accurate records of income and expenses of the Health Department, program costs, grant monies disbursement, billings of individuals, businesses, Medicaid, Medicare, and third party payers for services rendered.

Office Manager: assists the Administrator in the administration and delivery of Department program and services. The employee in this position is responsible for and held accountable for maintaining patient/client confidentiality. This is highly specialized diverse administrative support work with broad latitude to establish and accomplish the goals of a unit/program. This Position serves in the capacity of Privacy Officer and works closely with the administrator in development of policies related to PHI, maintaining documentations to be compliant with HIPPA requirements, and administering investigations of complaints related to PHI.

Public Health Nurse: performs duties in various programs of the Health Department; in addition, a PHN II serves as a coordinator for a major program (MCH). The employee in this position uses all opportunities to provide health education and clinical services to Cowley County residents.

Healthy Start Home Visitor: provides education and support to pregnant women and families with a baby (birth to one year) to help give children a healthy start in life.

MCH Health Educator: provides education and support to the community of Cowley County; including community coalitions, as it relates to program priorities and health related risk factors to prevent chronic diseases and injuries.

Clerk: performs duties in various programs of the Health Department including routine clerical tasks. The Clerk follows prescribed procedures established by individual programs.

Continuing Education is provided to all MCH Staff. Individual Professional Development Plan (IPDP) of documenting educational updates is maintained on all MCH professional staff members in Individual Personnel Files. Training and Continuing Education includes the following activities:

- Orientation to MCH services is provided for any new MCH staff at the annual Maternal and Child Health Conference and HSHV Fall Regional training.
- Utilization of KSTrain
- Healthy Start Home Visitor, MCH Health Educator and MCH Coordinator will attend ne statewide conference of the Department's choice. Healthy Start Home Visitor will attend the Governor's Public Health Conference and the Fall Regional HSHV training.

Orientation of new home visitors also consists of six MCH Service Manual components:

1. Training and review of relevant agency/local policies and procedures
- Child Abuse and Neglect Reporting. A Guide for Reporting Child Abuse and Neglect in Kansas (<http://www.dcf.ks.gov/services/PPS/Documents/GuidetoReportingAbuseandNeglect.pdf>)
- Confidentiality related to the Health Insurance Portability and Accountability Act (HIPAA) www.hhs.gov/ocr/hipaa/
2. Consultation with the nurse or social work supervisor or other designated professional staff regarding public health services in Kansas
3. Review of the PMI Manual
4. Review of the Aid to Local Grant/Contract Application and Reporting Guidelines for the state fiscal year with supervisor
5. Orientation to all programs and staff in the local health department/agency
6. Orientation to referral resources in the local community and county

Attach an Agency Organizational Chart

Did you attach an Agency Organizational Chart that clearly identifies where the PMI section falls within the agency and the staff associated?: Yes

A.1.1 - Build internal capacity

Start Date:

End Date:

Attachments:

A.1.1.1 - Attend annual meeting/training provided by KDHE

Start Date:

End Date:

Attachments:

A.1.1.2 - Provide orientation and training of new staff**Start Date:****End Date:****Attachments:****Describe your process for orienting and training staff new to the PMI program.:****A.1.1.3 - Develop a method for recruiting selecting, and training staff****Start Date:****End Date:****Attachments:****A.1.2 - Communicate and coordinate local work with State staff****Start Date:****End Date:****Attachments:****A.1.2.1 - Submit Financial Status Report and Client Demographic Summary quarterly****Start Date:****End Date:****Attachments:****A.1.2.2 - Submit Quarterly Progress Report****Attachments:****Start Date:****End Date:****A.1.2.3 - Participate in site visits and technical assistance calls as requested by the State****Start Date:****End Date:****Attachments:****A.2 - Program evaluation****Start Date:****End Date:****Attachments:** Satisfaction survey.pdf; PMI Client Sat. Survey.pdf**Summarize your program evaluation methods to include how you will expand services to meet community needs.:**

Dependent upon the internal or external hire; all new employees are required to complete a comprehensive orientation and training program that outlines and educates the individual for success in public health and the HD. The training is provided by current staff members that are deemed to be expert in their respective areas. New employees will meet regularly with the Administrator so that training effectiveness and performance can be measured and assessed. Upon completion of the orientation the employee is provided mentoring and additional program specific training by an assigned senior employee. This training is also monitored by program leadership and reported to the Administrator. Upon completion of structured orientation and training a formalized performance plan will be created detailing objectives and outcomes that will be measured during the review period. The performance outcome data is reviewed and if outcomes do not meet expectations, programmatic functions and structure are reviewed to insure that barriers to successful program outcomes are identified and overcome. This all is part of the plan-do-study-act cycle that the HD uses to support total HD operational objectives.

Attach a Client Satisfaction Survey in the attachment section above**Did you attach a Client Satisfaction Survey?:** Yes

A.2.1 - Develop a program evaluation process to ensure services are provided as proposed

Start Date:

End Date:

Attachments:

A.2.1.1 - Develop and use a client satisfaction survey

Start Date:

End Date:

Attachments:

A.2.1.2 - Develop and maintain program policies and procedures that are based on program standards and guidelines.

Start Date:

End Date:

Attachments:

A.2.2 - Create and maintain a functioning advisory group.

Start Date:

End Date:

Attachments:

Describe your PMI Advisory Group membership and frequency of meetings.: Advisory Council

Tim Durham Family Life Services
Shay Cox TFI (Family Services)
Bonnie Condit School Nurse
Cathy Ulbrich School Nurse
Gail McPherson Eagles Nest (Faith Based organization providing mentoring for women)
Debbie Shamburg Client
Lorrie Gordon Health Department

Meet annually or as otherwise required.

A.2.2.1 - Composition of the advisory group will reflect the community (race, ethnicity, SES)

Start Date:

End Date:

Attachments:

A.2.2.2 - Regular meetings will be held and minutes of the meeting kept

Start Date:

End Date:

Attachments:

B - Data and Information

B.1 - Measure program impact

Start Date:

End Date:

Attachments:

Describe your program goals, objectives and outcome measures.: The overall purpose of this program is to reduce the incidence of infant mortality in Cowley County Kansas and to reduce the negative health outcomes in children due to poor health or personal habits of the mother while pregnant.

We have targeted the most extremely high risk pregnant population in the county as candidates for this service. We anticipate 25 - 50 mothers will be part of this program each year. If the birth outcomes and early life health indicators of the mother and child improves then our corresponding community health outcomes will also improve. Cowley County welcomes approximately 1000 new babies annually it is estimated by the HD that 20% of those children (200) are at risk and that 5% are at very high risk (50) for negative health outcomes due to poor prenatal conditions or habits of the mother.

Successful enrollment into the program and successful completion will reward the participant with better health, a healthier child, and the community will

How will you measure effectiveness of services, interventions and referral networks?: We will track outcomes from each activity and judge overall program effectiveness in the longer term through the use of data provided by KDHE in the Kansas Health Matters format.

How will you ensure services provided are those needed by clients?: A targeted approach based upon individual case management and individual risk analysis performed by the case managers during program intake will identify needed interventions; development of individual improvement plans for each client will be developed, progress through target intervention or improvement programs will be recorded as client moves through pregnancy and hopeful completion of program. Follow up will occur post partum in conjunction with HSHV program activities.

Describe your plan for collecting and entering client information into DAISEY (KDHE approved data system), including who will collect the information and how it will be collected. If you plan to import data from another system, include the name of the system (Insight, Nightingale Notes, etc.): All encounter data is recorded in the business processing software PHClinic for billing purposes - specific case data will be recorded in case files and Daisey.

B.1.1 - Develop an evaluation tool to measure program effectiveness

Start Date: 07/01/2016

End Date: 06/30/2017

Attachments:

B.1.1.1 - Gather and use data to plan and evaluate interventions and referral networks

Start Date:

End Date:

Attachments:

B.1.1.2 - Gather and use data to assess program impact

Start Date:

End Date:

Attachments:

D - Interventions to Improve Public Health

D.1 - Provide services to enable pregnant women to carry their pregnancies to term**Start Date:****End Date:****Attachments:**

Describe services to be provided to pregnant women that will enable them to carry their pregnancies to term. Note the strategies and curriculums used and note whether or not they are evidence-based.: The emphasis of our services will be targeted at the 30 to 50 pregnancies that occur within a high risk group of women which are considered to be extremely high risk. Extreme risk factors include smoking or substance abuse by the mother while pregnant, lack of prenatal health care, teen pregnancy, other medical conditions that would make successful full term pregnancy unlikely. The health related services would provide closely monitoring the prenatal physical condition of the expectant mother and managing ongoing care with multiple providers this service is not currently offered in the area and can be coordinated by the HD as we are HIPPA compliant. In all situations we will partner with the established provider in our area, Family Life Services in order to maximize the utilization of established qualified support and education programs that are not directly tied to the physical health of the patient. As the local HD we maintain health clinics in both major population centers in Cowley County, KS i.e. Arkansas City and Winfield. This allows for the ease of care and overcomes the barrier of transportation. The expectant mothers will be evaluated on a risk basis and the highest risk pregnancies will be closely monitored and case managed. All program service recipients will be assessed in compliance with the PMI program manual. All needs will be followed up through case management team to insure the outputs are being provided by partners and that outcomes are being met. The HD will chart the physical condition of the expectant mothers and coordinate with other clinical health services providers. Expectant mothers will also be enrolled in other programs that would benefit their health and the health of the child during this time to provide for a continuum of care prenatal and postpartum.

Prenatal medical care: Access to routine prenatal medical care by physicians, advanced registered nurse practitioners (includes certified nurse midwives). Does not include payment for medical services. Case managers will link clients to health care systems of care and healthcare coverage through Kancare and/or other affordable insurance coverage for these services.

b. Linkage to Medical care (non-pregnancy related) for the woman and infant (up to six months of age): Services by a licensed medical provider (includes physicians and advanced registered nurse practitioners) for the routine health maintenance, prevention or treatment of non-pregnancy related illness, or injury.

c. Housing: Support for housing, in extreme circumstances.

d. Education: Activities that will facilitate the client's ability to advance toward a high school diploma, GED, or vocational training/college during the time the client is participating in the PMI case management services.

e. Promotion of Paternal Involvement and Responsibility: Opportunities that will support interactions among the infant's mother and/or father including parenting education and assistance with the legal process for the establishment of paternity.

f. Adoption Counseling and Referrals: Provision by the grantee or facilitation of access to services that will provide accurate information regarding the adoption process. Support services as needed for parent up to six months post-adoption.

g. Drug and Alcohol Assessment and Treatment: Assistance to obtain substance use screening, assessment and treatment by licensed or certified substance abuse programs/providers

h. Domestic Abuse Protection: Assistance to any service or facility that will assure physical and emotional security and safety for the client, infant and other children age 6 and under.

i. Child Care: Assistance to obtain child care while the client is participating in the pregnancy maintenance program and up to six months post-delivery when the parent or guardian is attaining education or employment; excluding in home services.

j. Parenting Education/Support: Provision of parenting education to promote infant development and emotional support up to six months post-delivery.

k. Transportation: Provision of transportation, when not otherwise available in the service area, for the client to access program services.

l. Mental Health: Assist to obtain mental health screening, assessment and treatment by qualified mental health provider

Describe the adoption services and pregnancy education to be provided as part of the program.: If the mental state of the expectant mother is such that she wishes to provide the child for adoption Family Life Services will be notified and a referral to a local adoption agency will occur. The pregnant woman will be allowed to avail herself of other program opportunities to provide for her health and well being as provided in the program. Health motioning will continue bith prenatal and postpartum.

Estimate the total number of pregnant women to be served during the grant period.: 30 - 50

D.1.1 - Assure that no individuals unable to pay will be denied pregnancy maintenance services

Start Date:

End Date:

Attachments:

D.1.1.1 - Have on file written protocols that clearly outline how the local pregnancy maintenance services are to be implemented

Start Date:

End Date:

Attachments:

D.1.2 - Adoption services and pregnancy education will be part of the program

Start Date:

End Date:

Attachments:

D.1.2.1 - Case managers to attend adoption training class

Start Date:

End Date:

Attachments:

D.1.2.2 - Provide plan for providing adoption as an option

Start Date:

End Date:

Attachments:

D.1.2.3 - Provide adequate resources and referrals

Start Date:

End Date:

Attachments:

D.2 - The program shall not perform, promote or refer for education in favor of abortion.

Start Date:

End Date:

Attachments:

Can you provide assurances that the program will not perform, promote or refer for education in favor of abortion?: Yes

Select all counties to be served below

County: Cowley

D.2.1 - Provide assurances

Start Date:

End Date:

Attachments:

E - Communications and Promotions

E.1 - Increase public awareness of services and generate buy in

Start Date:

End Date:

Attachments:

How will you promote your Pregnancy Maintenance Initiative (PMI) services to the community?: Program services will be promoted along with all other Health Department services and across all media formats. These would include but not limited to print, electronic and mass media strategies. We also will perform outreach and promotion through referral and stakeholder and organizational meetings.

What are your planned outreach activities?: Multiple outreach and educational presentations to local stupor groups and agencies.
Health Fairs
outreach to local private OB/GYN offices
WIC Clinic outreach
Annual county wide baby shower

E.1.1 - Promote services to community

Start Date:

End Date:

Attachments:

E.1.2 - Planned outreach activities

Start Date:

End Date:

Attachments:

E.1.3 - Target and recruit clients

Start Date:

End Date:

Attachments:

F - Partnerships

F.1 - Collaborative partnerships with community providers

Start Date:

End Date:

Attachments:

Identify your key partners including community-based health, social service providers, and Maternal and Child Health (MCH). Describe how you collaborate to ensure needed services are provided.: As the local HD we operate the MCH program and we will fully integrate this program into our suite of services. We are the optimum provider in the area and have a deeply vested interest in making certain these needs are met in our at risk population.

Other partners and service providers are listed below:

Healthy Beginnings
Family Life Services
305 S Summit
Arkansas City, KS 67005
620-442-1688
Charla Myrick, RN- Coordinator
www.FLSonline.net

TFI Family Services
Winfield, KS

Eccell
Eccell.getmydiploma.org
113 W 9th Street
Winfield, KS 67156
620-221-2266
Sherry Barrier- Project Coordinator
sbarrier@ckesc.org

Community Health Center
221 W 8th Ave
Winfield, KS 67156
620-221-3350
Geydy Cruz-Guerra-Outreach Navigator
gacruzguerra@cowleyhealthcenter.org

Mid-Kansas Community Action Program
730 Cliff Drive
Augusta, KS 67010
316-452-1326
Shirlene Jacobs-Individual & Family Specialist
sjacobs@mid-capinc.org
www.mid-capinc.org
(This company is based in Augusta but they help surrounding counties including Cowley)

Eagle Nest Inc.
112 E 9th Ave
Winfield, KS 67156
620-229-8282
Lura Unger-Program Director
lura@eaglenestinc.org
www.eaglenestinc.org

Reach
Tiny-k
800 Main Place, Suite 304
Winfield, KS 67156
620-229-8304
www.REACHtiny-k.web.com

Parents as First Teachers
Winfield, KS 67156
620-221-5124
Susan Rush
Susan_rush@usd465.com

Cherly Tolson
Cherly-tolson@usd465.com

Four County Mental Health Centers
22214 D St
Winfield, KS 67156
620-221-9664
www.fourcounty.com

When referring for services outside the program, what are the processes for initial referrals and for follow-up after referral?: Case worker will consult with contact at agency to which referral is being made, will assist in setting initial appointment and follow up with both client and referral contact to ensure appointment is kept. Communication will continue and be charted as long as mother remains in the program.

F.1.1 - Build and maintain local partnerships

Start Date:

End Date:

Attachments:

F.1.1.1 - Develop and maintain collaborative partnerships with community providers of related services

Start Date:

End Date:

Attachments:

F.1.1.2 - Develop referral sources for related services

Start Date:

End Date:

Attachments:

F.1.1.3 - Track referrals made and outcomes of those referrals

Start Date:

End Date:

Attachments: